AJH 35459

PERMIT APPLICATION  PERMIT APPLICATION  PERMIT APPLICATION  A complete application consists of this form and one of the following:  Apply for a new permit.  Apply for a construction permit.  Modify an existing permit.  Form A, Form B, Form C, Form F, or Short Form C  Por additional information contact:  (Give reason for modification under Item II.A.  Name of business, manipality, company, etc. repositing permit.  B. Facility Name and Location  Tacksco Ca. Baard af Education  Tacksco Co. Baard af Education	<b>™</b>	ENTUCKY POLLUTANT DISCHARGE
PERMIT APPLICATION  PERMIT APPLICATION  PERMIT APPLICATION  Apply for a new permit.  Apply for a construction permit.  By additional information contact:  KPDES Branch (502) 564-3410  I. FACILITY LOCATION AND CONTACT INFORMATION  I. FACILITY LOCATION  A. Name of business, municipality, company, etc. repuesting permit  The Large Ca. Bard of Education  Feelity Jonation Address (c. Auce, road, eds).  Mailing Street:  The Large Ca. Beard of Education  Feelity Jonation Address (c. Auce, road, eds).  Mailing Street:  The Large Ca. Beard of Education  Mailing		ELIMINATION SYSTEM
PERMIT APPLICATION  This is an application to: (check one) Apply for a new permit. Apply for a construction permit. Give reason for modification under Item II.A. For additional information contact: KPDES Branch (502) 564-3410  I. FACILITY LOCATION AND CONTACT INFORMATION USE D. Facility Name and Location I. FACILITY LOCATION AND CONTACT INFORMATION USE D. Facility Name and Location I. FACILITY LOCATION AND CONTACT INFORMATION USE D. Facility Name and Location I. FACILITY LOCATION A. Name of business, municipality, company, etc. requesting permit I. FACILITY LOCATION A. Name of business, municipality, company, etc. requesting permit I. FACILITY LOCATION A. Provide a brief description of activities, products, etc.  Mailing City, State, 210 Code:  I. FACILITY DESCRIPTION A. Provide a brief description of activities, products, etc.  Engaged in activities, products,		
This is an application to: (check one)  Apply for a new permit.  Apply for a construction permit.  Give reason for modification under Hem II.A.  Form A, Form B, Form C, Form F, or Short Form C  Apply for a construction permit.  Give reason for modification under Hem III.A.  For additional information contact:  KPDES Branch (502) \$64-3410  L FACILITY LOCATION AND CONTACT INFORMATION  A Name of business, manicipality, company, etc. popusating permit  B. Facility Name and Location  Facility Location Name:  C. Facility Owner/Mailling Address  Owner Name:  The Location Name:  C. Facility Owner/Mailling Address  Owner Name:  The Location Address I.C. Beard of Education  Facility Location Name:  The Location Address I.C. Beard of Education  Facility Location Name:  The Location Address I.C. Beard of Education  Mailing City, State, 24p Code:  The Location City, State, 24p Code:  Mailing City, State, 24p Code:  Ma		Section 1
Apply for a new permit. Apply for a construction permit. Bracket Description Address (a construction permit and address (but a permit and address (construction permi		PERMIT APPLICATION
Apply for a new permit. Apply for a construction permit. Bracket Description Address (a construction permit and address (but a permit and address (construction permi	× By	
Apply for a new permit. Apply for a construction permit. Bracket Description Address (a construction permit and address (but a permit and address (construction permi		
Apply for reissuance of expiring permit.  Modify an existing permit.  For additional information contact:  KPDES Branch (502) 564-5410   Modification information contact:  KPDES Branch (502) 564-5410   Modification information contact:  KPDES Branch (502) 564-5410  Modification information contact:  KPDES Branch (502) 564-5410   C. Facility Owner/Mailing Address  Owner/Mailing Address  Mailing Store.  Maili		
Apply for a construction permit.  Modify an existing permit.  Give reason for modification under Item II.A.  For additional information contact:  KPDES Branch (502) 564-3410  A GENEY:  USE  I. FACILITY LOCATION AND CONTACT INFORMATION  A Name of business, municipality, company, etc. requesting permit  Tacktoo Ca. A Agand of Education  Pacility Name and Location  Pacility Location Name:  The Education Name		
Give reason for modification under Item II.A.  KPDES Branch (502) 564-3410  I. FACILITY LOCATION AND CONTACT INFORMATION  A Name of business, municipality, company, etc. requesting permit  Tacksoc Ca. Raped of Education  B. Pacility Name and Location  Pacility Name and Location  Owner Name:  Jacksoc Co. Baard of Education  Mailing Street:  Lacksoc Co. Baard of Education  Mailing Street:  Lacksoc Co. Baard of Education  Mailing Street:  Lacksoc Co. Baard of Education  Jacksoc Co. Baard of Education  Ja	Apply for a construction permit.	
I. FACILITY LOCATION AND CONTACT INFORMATION  A. Name of business, manicipality, company, etc. requesting permit  Jacksoc Cs. Baard of Education  Pacifity Location Name:  The state of Location  Pacifity Location Name:  The state of Location  Pacifity Location Address (e. street, road, etc):  High my JO Nest Trailing Street:  Had JO Nest Trailing Street:  High my JO Nest Trailin	Modify an existing permit.	
I. FACILITY LOCATION AND CONTACT INFORMATION  A. Name of business, manicipality, company, etc. requesting permit  The control of the control	Give reason for modification under item it.A.	
B. Facility Name and Location  C. Facility Owner/Mailing Address  Owner Name:  Ture Elana tary  Facility Location Name:  Ture Elana tary  Facility Location Address (i.e. street, road, ch):  High was 10 Nest  Facility Location Ety, State, Zip Code:  Typer, Kentucky. 40486  Telephone Number:  Telephone Number:  A. Provide a brief description of activities, products, etc:  Engaged in a ellection, trustant, and disposal of wastewater for a scheel.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & PS-S Elana tary  Other SIC Codes:  11. FACILITY LOCATION  A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  The Facility Site Latitude (degrees, minutes, seconds):  37° 20° 41  E. Method used to obtain latitude & longitude (see instructions):  Machock  Mach		
B. Facility Name and Location  Facility Location Name:  Owner Name:  O		
Facility Location Name:    Later   Lange   Lange   Later   Lange   Later   Lat		C. Facility Owner/Mailing Address
Highway 30 Nest Pacility Location City, State, Zip Code:  Tywer, Kewtucky 40486  II. FACILITY DESCRIPTION  A. Provide a brief description of activities, products, etc:  Engaged in a lettico, treatment, and disposal of wastewater for a school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  Other SIC Codes:  Other SIC Codes:  III. FACILITY LOCATION  A. Attach a U.S. Geological Survey 7½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Jackson County  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Macheek  M		Owner Name:
Highway 30 Nest Pacility Location City, State, Zip Code:  Tywer, Kewtucky 40486  II. FACILITY DESCRIPTION  A. Provide a brief description of activities, products, etc:  Engaged in a lettico, treatment, and disposal of wastewater for a school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  Other SIC Codes:  Other SIC Codes:  III. FACILITY LOCATION  A. Attach a U.S. Geological Survey 7½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Jackson County  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Macheek  M	Typer Elementary School	Jackson Co. BOArd of Education
Hacility Location City, State, Zip Code:  Typer, Kentucky. 40486  II. FACILITY DESCRIPTION  A. Provide a brief description of activities, products, etc:  Engaged in a letticos, treatment, and disposal of mastematys for A school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  Other SIC Codes:  1. FACILITY LOCATION  A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  The standard Industrial Classification (SIC) Code and Description  Other SIC Codes:  Other SIC Codes:  1. FACILITY LOCATION  A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  The standard Industrial Classification (SIC) Code and Description  City where facility is located (if applicable):  NA  C. Body of water receiving discharge:  B. Facility Site Lanjude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Madeheck  Malling City, State, Zip Code:  Malli		
II. FACILITY DESCRIPTION  A. Provide a brief description of activities, products, etc:  Engaged in collection, treatment, and disposal of wastewater for a school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  PS-S Elementary School  III. FACILITY LOCATION  A. Attach a U.S. Geological Survey 7½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Jackson County  C. Body of water receiving discharge:  B. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Modebeck	Highway 30 West	7.0. Dox 2/)
II. FACILITY DESCRIPTION  A. Provide a brief description of activities, products, etc:  Engaged in a lettico, treatment, and disposal of masternates for A school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  PS-S Elementary School Wasternates For A Attach a U.S. Geological Survey 7½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Jackson County  C. Body of water receiving discharge:  Grassy Branch  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Macheck  Macheck		
II. FACILITY DESCRIPTION  A. Provide a brief description of activities, products, etc:  Engaged in a lection, treatment, and disposal of wastewater for A school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  PS-5 Elementary School Wastewater Treatment  Other SIC Codes:  B. County LOCATION  A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Jackson County  C. Body of water receiving discharge:  Branch  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Modebeck	Lyner, Kentucky. 40486	Telephone Number
A. Provide a brief description of activities, products, etc:  Engaged in a lection, treatment, and disposal of wastewater for A school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  PS-S Elementary School Wastewater Treatment  Other SIC Codes:  B. County LOCATION  A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Jackson County  C. Body of water receiving discharge:  B. Assey Branch  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Macheck		(606) 2F7-7/F/
A. Provide a brief description of activities, products, etc:  Engaged in a lection, treatment, and disposal of wastewater for A school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  PS-S Elementary School Wastewater Treatment  Other SIC Codes:  B. County LOCATION  A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Jackson County  C. Body of water receiving discharge:  B. Assey Branch  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Macheck	II FACILITY DESCRIPTION	
Engaged in a lection, treatment, and disposal of mastewater for A school.  B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  PS-S Elementary School Waste puter Treatment  Other SIC Codes:  B. County LOCATION  A. Attach a U.S. Geological Survey 7½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Jackson County  City where facility is located (if applicable):  NA  C. Body of water receiving discharge:  Grassy Branch  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Macheck		
B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  H. FACILITY LOCATION  A. Attach a U.S. Geological Survey 7½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  Tackson County  C. Body of water receiving discharge:  O. Facility Site Latitude (degrees, minutes, seconds):  37° 20° 41°  E. Method used to obtain latitude & longitude (see instructions):  Moderneck	· · · · · · · · · · · · · · · · · · ·	
B. Standard Industrial Classification (SIC) Code and Description  Principal SIC Code & Description:  Other SIC Codes:  PS-S Elementary School Vasta pater Treatment  Other SIC Codes:  PS-S Elementary School Vasta pater Treatment  Other SIC Codes:  PS-S Elementary School Vasta pater Treatment  Other SIC Codes:  PS-S Elementary School Vasta pater Treatment  Other SIC Codes:  PS-S Elementary School Vasta pater Treatment  Other SIC Codes:  PS-S Elementary School Vasta pater Treatment  Other SIC Codes:  Other SIC Codes:  PS-S Elementary School Vasta pater Treatment  Other SIC Codes:  Other SIC Codes:  Other SIC Codes:  PS-S Elementary School Vasta pater Treatment  Other SIC Codes:  Other SIC C	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	and disposal of wastewater for
Principal SIC Code & Description:  Other SIC Codes:  Package Plant  Other SIC Codes:  Package Plant  Trained  Trained  Other SIC Codes:  Package Plant  Trained  Trained  Trained  Other SIC Codes:  Package Plant  Trained	A 500-61.	
Other SIC Codes:  10 Codes:  10 Codes:  11 Elementary and Secondary Schools  12 Elementary and Secondary Schools  13 Elementary and Secondary Schools  14 Elementary and Secondary Schools  15 Elementary and Secondary Schools  16 Elementary and Secondary Schools  17 Elementary and Secondary Schools  18 Elementary and Secondary Schools  18 Elementary and Secondary Schools  19 Elementary and Secondary Schools  10 Elementary and Secondary Schools  11 Elementary and Secondary Schools  12 Elementary and Secondary Schools  13 Elementary and Secondary Schools  14 Elementary and Secondary Schools  15 Elementary and Secondary Schools  16 Elementary and Secondary Schools  17 Elementary and Secondary Schools  18 Elementary and Secondary and Secondary Schools  18 Elementary and Secondary and Seco		
Other SIC Codes:    Secondary Schools	Principal SIC Code &	
MI. FACILITY LOCATION  A. Attach a U.S. Geological Survey 7 ½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  C. Body of water receiving discharge:  C. Body of water receiving discharge:  C. Facility Site Latitude (degrees, minutes, seconds):  Facility Site Longitude (degrees, minutes, seconds):  83° 55° 37°  E. Method used to obtain latitude & longitude (see instructions):  Modelite K.	Description: PJ-3 Element A	
A. Attach a U.S. Geological Survey 7½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  C. Body of water receiving discharge:  C. Body of water receiving discharge:  C. Body of water receiving discharge:  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Modeheck	Other SIC Codes:	8211 Elementary and Secondary Schools
A. Attach a U.S. Geological Survey 7½ minute quadrangle map for the site. (See instructions)  B. County where facility is located:  C. Body of water receiving discharge:  C. Body of water receiving discharge:  C. Body of water receiving discharge:  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Modeheck	III. FACILITY LOCATION	
C. Body of water receiving discharge:  Grassy Branch  D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Modeheck		
C. Body of water receiving discharge:    C. Body of water receiving discharge:   C. Body of water receiving discharge:   C. Body of water receiving discharge:   C. Body of water receiving discharge:   C. Body of water receiving discharge:   C. Body of water receiving discharge:   C. Body of water receiving discharge:   C. Body of water receiving discharge:   C. Body of water receiving discharge:   C. Body of water receiving discharge:   Facility Site Longitude (degrees, minutes, seconds):   83° 55° 37"   E. Method used to obtain latitude & longitude (see instructions):   Modeleck   C. Body of water receiving discharge:   D. Facility Site Longitude (degrees, minutes, seconds):   83° 55° 37"   C. Body of water receiving discharge:   C. Body of water receivin	B. County where facility is located:	
D. Facility Site Latitude (degrees, minutes, seconds):  37 20 41  E. Method used to obtain latitude & longitude (see instructions):  Modeheck	C. Body of water receiving discharge:	
E. Method used to obtain latitude & longitude (see instructions): Modeheck	D. Facility Site Latitude (degrees, minutes, seconds):	Facility Site Longitude (degrees, minutes, seconds):
		83° 55' 37"
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable):	E. Method used to obtain latitude & longitude (see instructions):	Modeheck
	F. Facility Dun and Bradstreet Number (DUNS #) (if applicable):	

IV. OWNER/OPERATOR INFORMAT	ION		
A. Type of Ownership:    A. Type of Ownership:   Privately Owned   Privately Owned	ed State Owned	Both Public and Pri	vate Owned Federally owned
B. Operator Contact Information (See instr		_ Boar r done and r r	vale Owned Tederally Owned
Name of Treatment Plant Operator:		Telephone Number:	287-8166
Operator Mailing Address (Street):	217 #/		G-07 0125
Operator Mailing Address (City, State, Zip Code):	x 217 Huy	42/5	
Is the operator also the owner?	Elex, Ry.	Is the operator certified	If yes, list certification class and number below.
Yes No Certification Class:		Yes No Certification Number:	
WW Treatment	1	Certification Number:	9
V. EXISTING ENVIRONMENTAL PER	RMITS		
Current NPDES Number:	Issue Date of Current Perm	nit:	Expiration Date of Current Permit:
Number of Times Permit Reissued:	Date of Original Permit Iss	suance:	Sludge Disposal Permit Number:
Kentucky DOW Operational Permit #:	Kentucky DSMRE Permit	Number(s):	The second of th
C. Which of the following additional environments	onmental permit/registra		lso apply to this facility?  PERMIT NEEDED WITH  PLANNED APPLICATION DATE
Air Emission Source	EXISTINOTE	WHITING.	PLANNED ALL EICATION DATE
Solid or Special Waste			
Hazardous Waste - Registration or Permit			
			and the second of the second o
VI. DISCHARGE MONITORING REP	하다 여름을 취하하고 있는 것 같아. 그렇다		• • • • • • • • • • • • • • • • • • •
KPDES permit holders are required to su	bmit DMRs to the Div wes to specifically idention of Water.		regular schedule (as defined by the KPDES fice or individual you designate as responsible
A. Name of department, office or official su	ibmitting DMRs:	EdM	OFFAN Jr.
B. Address where DMR forms are to be sen	t. (Complete only if add	lress is different from	mailing address in Section I.)
DMR Mailing Name:	JACKSON	· County	Public Schools
DMR Mailing Street:	PO BOX		4215
DMR Mailing City, State, Zip Code:	MEKER	. H. 404	
DMR Official Telephone Number:	(606)	287 - 7/8	7/

## VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:	Filing Fee Enclosed:	

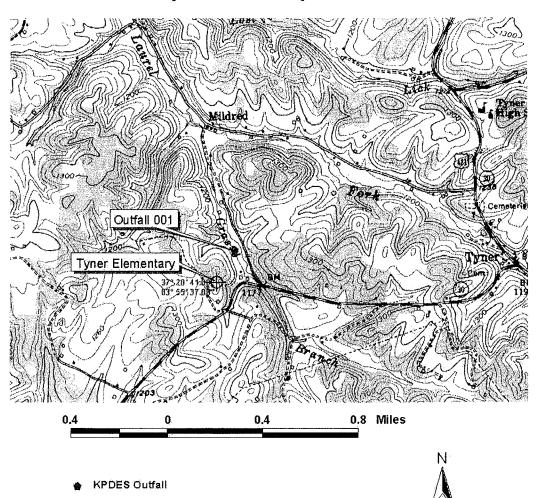
## VIII. CERTIFICATION

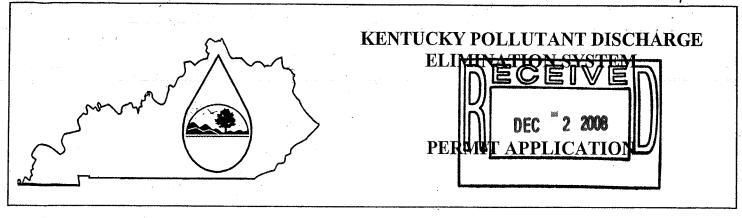
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
Ralph Hoskins, Superintendent	1606) 287-718/
SIGNATURE	DATE:
Canto	10-24-08

KPDES No.: KY0074128 AI No.: 35459 Fact Sheet Page 6

## **Tyner Elementary School**





A complete application consists of this form and Form 1. For additional information, contact: KPDES Branch, (502) 564-3410.

NAME OF FACIL	ITY: Tyn	er Elea	entary	Schoo	1							
I. FACILITY DIS		1 4	•		AGENCY USE	0	0	7	4	1	2	8
A. Do discharge(s) (Complete Item			No 🗌									٠
B. How many days	per week?	7			· · · · · · · · · · · · · · · · · · ·							
II. A. Give the basi	is of design for	r sizing of the	wastewater fa	acility (see i	instructions):						*	
80	Adult.	s 4	195 54	udest	\$	5.	7,6	81	59	,FH.		
B. If new discharge C. Indicate the desi					.01 MG	D	<del> </del>					
III. Outfall Locat	ion (see instr	uctions)										
Outfall (list)	Degrees	LATITUDE Minutes	Seconds	Degrees	LONGITUD Minutes		conds	To T	ECEIVI	NG W	ATER (r	iame)
001	3.7	20	48	83	55	3		.,	, 27055			-
4												
												· · · · · · · <del>- ·</del>
Method used to obt			nates, etc.)									

AI 35459

u wastewater	RCES OF POLLUTION, AND TREA other than domestic or sanitary is listed, c	omplete page 4 in ac	LOGIES (see instruct Idialon to page 1 and 2.	ions)	
OUTFALL NO.	OPERATION(S) CONTRIBUT	ING FLOW		EATMENT	потиция пой Супродіў ў СПЕННІ БДІСЦІ.
(list)	Operation (list)	Avg/Design Flow (include units)	List treatment com		List Codes from Table SC-1
001	San tary Waite water	7500GaVIJA	Activated 5	Tucke	3-4
	pulses grantes are consistent or subsection or make the pulse of the pulse.		ANACROBIC TO	atment	3-6
audos de signicio escide	ş		Trastment by 4	AIN AIN	J-M
			Disdrange to 5	water	4-11
			Anacrabic Di	cestion	5-8
			Chlorine Tu	estant	Storm som faction
		t X or - groups	A MAN AND THE REAL PROPERTY.	7	
Dome:	e(s) of wastewater discharged. stic (60% or more sanitary sewage)	Oil field wa			
VI. Does all water	ntact cooling water r used at facility (except for human con		Y	Yes	No
VII. Discharge to	other than surface waters. Check appr	opriate location:			
Publicl	y-owned lake or impoundment N	ame of lake:			
Publicl	y-owned treatment works (POTW).	åme of POTW:			
Land a	pplication of Effluent				
☐ Surfac	e injection (Check term and identify on m	nap) 🔲 lateral field;	☐ sinkhole; ☐ sinkin	g stream; 🔲	deep well
Closed	Circuit (Check appropriate term) He	olding tank; 🗌 Mec	hanical evaporation;	Waste impo	undment
VIII. Check the me	tals present in the discharge if applical	ble and indicate the	quantity discharged p	per year. (In	dicate units).
Antim Arsen	ic	Copper		Silver Thallium	
☐         Beryll           ☐         Cadm           ☐         Chron	ium	Mercury Nickel		Zinc	

IX. INTERMITTENT DISCHARGES (C	omplete this sect	ion for intermittent discharg	10 orb			
A. Number of bypass points:		(If bypass points are indicated for each bypass.)	bypass points are indicated, information below must be completed			
Check when bypass occurs:		Wet Weather	Dry Weather			
Give the number of bypass incidents		per year	per year			
Give average duration of bypass		hours	hours			
Give average volume per incident		1,000 gallons	1,000 gallons			
Give reason why bypass occurs:						
B. Number of Overflow Points: (If d	lischarge is from a	n overflow point, the informa Wet Weather	tion below must be completed.)			
3	<u> </u>	,	Dry Weather			
Give the number of overflow incidents:		per year	per year			
Give average duration of overflow:	g 5 ·	hours	hours			
Give average volume per incident:	8	1,000 gallons	1,000 gallons			
C. Number of seasonal discharge points						
Give the number of times discharge occurs	s per year					
Give the average volume per discharge occ	currence	(1,000 gallons)				
Give the average duration of each discharg		(days)				
List month(s) when the discharge occurs		· · ·				
X. AREA SERVED (see instructions)						
NAME		ACTUAL	POPULATION SERVED			
Tymer Eleventary Se	hool	\$ 5	75			
TOTAL POPU	LATION SERVE	57 57	25			

XI. COOLING-WATER ADDITIVES AND THEIR COMPOSITIONS						
Additive	Composition	Concentration (mg/l)				

XII. EFFLUENT CHARACTERIS	Adam te gangan sa		
A. Indicate results of analysis for	pollutants listed below.	or and the second section of the sec	
POLLUTANT/PARAMETER	MAX DAILY VALUE	AVG DAILY VALUE	NUMBER OF SAMPLES
BOD₅	<del>\$100</del> 3.20	2.50 1.90	1/30
TOTAL SUSPENDED SOLIDS	500 300	2-50 1.90	1/30
FECAL COLIFORM	450	<10	1/30
TOTAL RESIDUAL CHLORINE	0.019	0.0	1/30
OIL AND GREASE	1,4	- 1.4	- 1/30
CHEMICAL OXYGEN DEMAND	- 87	- 87	- 150
TOTAL ORGANIC CARBON	- 10.48	- 10.48	- 1/30
AMMONIA	0.67 0,34	<b>633</b> 0,20	1/30
DISCHARGE FLOW	Flow in bondwit or thry Tourtaint Plant		
РН	-9.0 T.1	6.87	1/30
TEMPERATURE (WINTER)	4,444,44		
TEMPERATURE (SUMMER)		-	<b>-</b>

			<del></del>		
•	- 01 1		,		
B. Frequency and duration of flow:	24 hours	I day a w	4.4.10		
	* 'e'			<del></del>	

## XIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
RAIDH Hoskins, Superintendent	606) 287-7/8/
SIGNATURE	DATE
Tag hold	10-24-08